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APPLICANTS

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** CONTINUING DATA ***** *A-T*

** FOREIGN APPLICATIONS ***** *A-T*

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** * SMALL ENTITY **
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Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY MI	SHEETS DRAWINGS 9	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input type="checkbox"/> No					

ADDRESS

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TITLE

Automated computer-implemented method and system for reorienting emission computer tomographic myocardial perfusion images

FILING FEE RECEIVED 428	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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